PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number 8/19/03

1064327

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10				Г	RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	375.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			(0 minus 20=		* Ø			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS				nus 3 =	* Ø			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in						olumn 2		TOTAL		OR	TOTAL	750	
CLAIMS AS AMENDED - PART II												THAN	
	(Column 1) (Column 2) (Column 3							SMALL		OR ·			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	CL AIM	=		X42=		OR	X84=		
_	FINOT PRESE	NIATION OF MIC	DETIPLE DET	PENDENT	CLAIM			+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
			DDI1. FEE			ADDIT. FEET							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							l	+140=	· · · · · · · · · · · · · · · · · · ·	OR	+280=		
-							L	TOTAL	<u> </u>	OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEE		JOH	ADDIT. FEEI		
AMENDMENT C	-	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	占	X42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	704-		
*	f the entry in colu	mn 1 is less than th	ne entry in colu	ımn 2. writi	e "0" in co	lumn 3.	L	+140=	,	OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."													
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													